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PTO/SB/01 (12-97)  
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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Deborah R. Beck	37,370	Michael D. Smith	40,181
Michael D. Beck	32,722	Michael D. Schwartz	44,326
Jeffrey A. Michael	37,394	Robert C. Hyta	46,791

☒ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	Deborah R. Beck, Baker & Daniels				
Address	300 North Meridian Street				
Address	Suite 2700				
City	Indianapolis	State	IN	ZIP	46204
Country	U.S.	Telephone	317-237-1196	Fax	317-237-1800

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Michael E.		Miller	
Inventor's Signature	<i>Michael E. Miller</i> 12.13.00		Date
Residence: City	Trafalgar	State	IN
		Country	U.S.
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Post Office Address			
City	Trafalgar	State	IN
		ZIP	46181
		Country	U.S.

☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b> Page <u>1</u> of <u>1</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any])				Family Name or Surname									
Joseph L.				Mark									
Inventor's Signature						Date		Dec. 13, 2000					
Residence: City		Indianapolis		State		IN		Country		U.S.		Citizenship	
Post Office Address		5154 N. Capitol Ave.											
Post Office Address													
City		Indianapolis		State		IN		ZIP		46208		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any])				Family Name or Surname									
Charles				Butcher									
Inventor's Signature										Date			
Residence: City		Carmel		State		IN		Country				Citizenship	
Post Office Address		361 Patoka Place											
Post Office Address													
City		Carmel		State		IN		ZIP		46032		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any])				Family Name or Surname									
John Phillip				Hancock									
Inventor's Signature										Date		12-13-00	
Residence: City		Fishers		State		IN		Country				Citizenship	
Post Office Address		11565 E. 116th Street											
Post Office Address													
City		Fishers		State		IN		ZIP		46038		Country	

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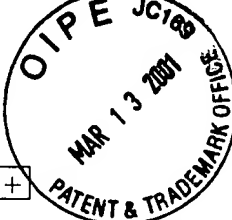
## DECLARATION

## REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
Rozell Williams	44,403		
Arthur R. Whale	18,778		
Kevin R. Erdman	33,687		
John F. Hoffman	26,280		
Anthony Niewyk	24,871		
Steve M. Hanley	46,756		
Adam F. Cox	46,644		
Gerard T. Gallagher	39,679		
Eric J. Groen	32,230		
Robert D. Null	40,746		
Daniel Tychonievich	41,358		

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)	<b>Attorney Docket Number</b>	SUROS-3
	<b>First Named Inventor</b>	Michael E. Miller, et al.
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09/707,022
	<b>Filing Date</b>	November 6, 2000
	<b>Group Art Unit</b>	
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
<b>Examiner Name</b>		

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**BIOPSY APPARATUS**

the specification of which ☒ is attached hereto OR ☐ was filed on (MM/DD/YYYY) [ ] as United States Application Number or PCT International Application Number [ ] and was amended on (MM/DD/YYYY) [ ] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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